



Annual Filing Division Statement of Information Officers List

Office Use Only

A2109

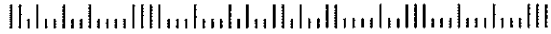


↑ Official Looking Seal

Corporation Number: _____

Payment: \$195.00

Due Date: 09/25/2009



Avoid Penalties, Fines and Suspension

Every **domestic stock and agricultural cooperative corporation** shall file a **Statement of Information** with the California Secretary of State, within 90 days after filing of its original Articles of Incorporation, and annually thereafter during the applicable filing period. A corporation is required to file a **Statement of Information** even though it may not be actively engaged in business at the time this statement is due. Failure to file the Statement of Information by its due date may result in the assessment of a \$250.00 penalty, which will be assessed by the California Franchise Tax Board. **California Corporations Code section 2204; Revenue and Taxation Code section 19141**.

Clearly complete this form to avoid errors and delay

ENTITY INFORMATION (P.O. Box not allowed, must be CA Address) **AGENT INFORMATION** (P.O. Box not allowed, must be CA Address)

BUSINESS ADDRESS: _____ AGENT FULL NAME: _____

CITY, STATE AND ZIP CODE: _____ ADDRESS: _____

PHONE: _____ FAX: _____ CITY AND ZIP CODE IN CA ONLY: _____

DESCRIBE THE TYPE OF BUSINESS: _____

OFFICERS INFORMATION (Must name all 3 Officers)

NAME	ADDRESS	CITY AND STATE	ZIP CODE
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PRESIDENT: _____

SECRETARY: _____

TREASURER: _____

DIRECTORS OF INFORMATION (Must name at least one Director)

NAME	ADDRESS	CITY AND STATE	ZIP CODE
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DIRECTOR 1: _____

DIRECTOR 2: _____

DIRECTOR 3: _____

BUSINESS DESCRIPTION:

Failure to comply with the necessary filing will cause the entity to be assessed penalties, fines and **SUSPENSION**. Should the entity become **SUSPENDED**, you will not have the right to conduct business and your entity name could be taken. CA B&P CODE SEC 17533.6. THIS PRODUCT OR SERVICE HAS NOT BEEN APPROVED OR ENDORSED BY ANY GOVERNMENT AGENCY, AND THIS OFFER IS NOT BEING MADE BY AN AGENCY OF THE GOVERNMENT. The referenced government agency may be contacted at California Secretary of State, P.O. Box 944230 Sacramento, CA 94244. In submitting this form you give Authorization to Annual Filing Division to file your statement of information on your behalf. Losing your Corporate Existence will have many negative ramifications.

Make check Payable to: Annual Filing Division

I, (we) certify that the above is true and correct.

Print Member / Manager Name

Member / Manager Signature